Case 19-16959-jkf Doc 11 Filed 01/06/20 Entered 01/06/20 11:34:29 Desc Main Document Page 1 of 2

Fill	in this information to identify your o	ase:							
	otor 1 Daniel J. Co								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA	·					
-	se number <u>19-16959</u>		-			Check if this is:			
						<ul> <li>An amended filing</li> <li>A supplement showing postpetition chapter</li> <li>13 income as of the following date:</li> </ul>			
0	fficial Form 106I					MM / DD/ Y	<del>YYY</del>		
S	chedule I: Your Inc	ome					•••	12/1	
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not includ	de infor	matic	n about your spo	ouse. If more space is	s needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spous	0	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			☐ Employed			
			☐ Not employed			☐ Not employed			
		Occupation	B&B Mechuanic/	trackm	an				
	Include part-time, seasonal, or self-employed work.	Employer's name	Amtrak					· · · · · ·	
	Occupation may include student or homemaker, if it applies.								
		How long employed t	here?						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any li	ne, write \$0 in the	space. Include your n	on-filing	
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all e	emplo	yers for that perso	on on the lines below.	lf you need	
						For Debtor 1	For Debtor 2 or non-filing spouse	_	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,884.00	\$	4	
3.	Estimate and list monthly over	time pay.		3.	+\$	540.00	+\$ N//	4_	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	5,424.00	\$N/A		

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Daniel J. Costello, Jr.		Case number (if known)		19-16959		
				For	Debtor 1		ebtor 2 or ing spouse	
	Сор	y line 4 here	4.	\$	5,424.00	\$	N/A	
5.	l ist	all payroll deductions:						
<b>.</b>	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,550.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	*-	0.00	š	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	451.00	<b>\$</b>	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h	+ \$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,001.00	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,423.00	\$	N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				•		
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	\$	0.00	\$	N/A	
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h	+ \$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
40	Colo	culate monthly income. Add line 7 + line 9.	10. \$		3,423.00 + \$		N/A = \$ 3	3,423.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		,423.00 · · ·			5,425.00
11.	. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00							
12.	Add Write appl	the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies	sult is t in Liab	he com ilities a	bined monthly in nd Related <i>Data</i>	ncome. a, if it	12. \$3	3,423.00
13.	Do y	you expect an increase or decrease within the year after you file this form	1?				Combine monthly i	
		No. Yes. Explain:						
		i oo. Enpiem.						

Official Form 106I Schedule I: Your Income page 2